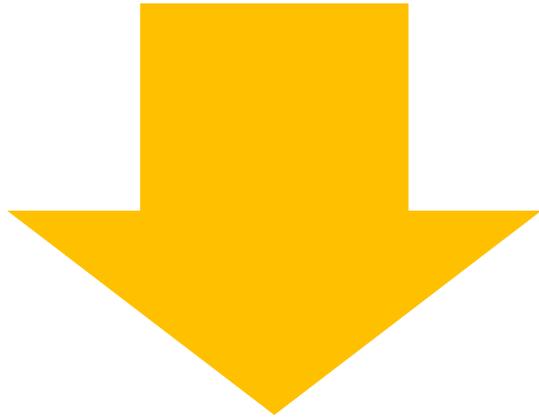




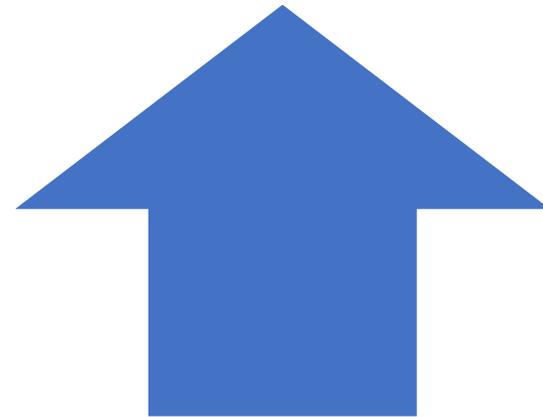
**Virginia Department of Social Services**  
*people helping people*

# Family First- Implementation July 1, 2021



Incentivize **Prevention Services to reduce entry into foster care** by offering IV-E 50/GF 50 Match for EBS Requirement

Dis-incentivize **Congregate Care** by Decreasing Options for IV-E 50/GF 50 Match- QRTP Requirement



# Overview of VDSS Child Welfare Spending (SFY19)

Foster Care  
\$353M

Prevention  
\$66M

Title IV-E \$60M

CSA \$213M

Medicaid \$80M

IV-B, PSSF, CAPTA,  
DV Grants, Contracts  
\$40M

CSA  
(CA/N, CHINS)  
\$26M

*Annual Foster Care  
Expenditures per Child  
\$46,861*

# Implementation Timeline Update

December  
2020

In-Home  
redesign

July 2021

Family First  
Prevention  
Services Act

April 2021

In-Home  
Guidance  
Released

# Incentivize Prevention Services – In-Home Services

The **vision** for Family First is to **keep children safe, strengthen families** and **reduce the need for foster care** whenever it is safe to do so.





# Aligning Practice

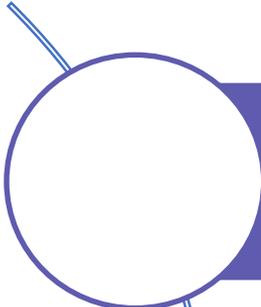
**In- Home Services**

**CPS Ongoing Practice**

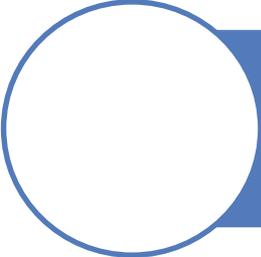
**Prevention Practice**

**Family First Legislation**

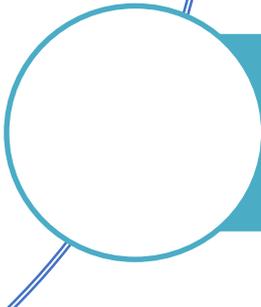
# Virginia Values Prevention!



Need should drive services rather than funding driving services



Prevention EBP Services available throughout the state regardless of funding (Medicaid, IV-E, CSA)



In-home alignment case management process should not be different for different funding sources- all cases follow best practices model: RC, SDM, CANS, Service Plan, FAPT/MDT

# Evidence Based Services in Virginia's Plan

Multisystemic  
Therapy  
(MST)

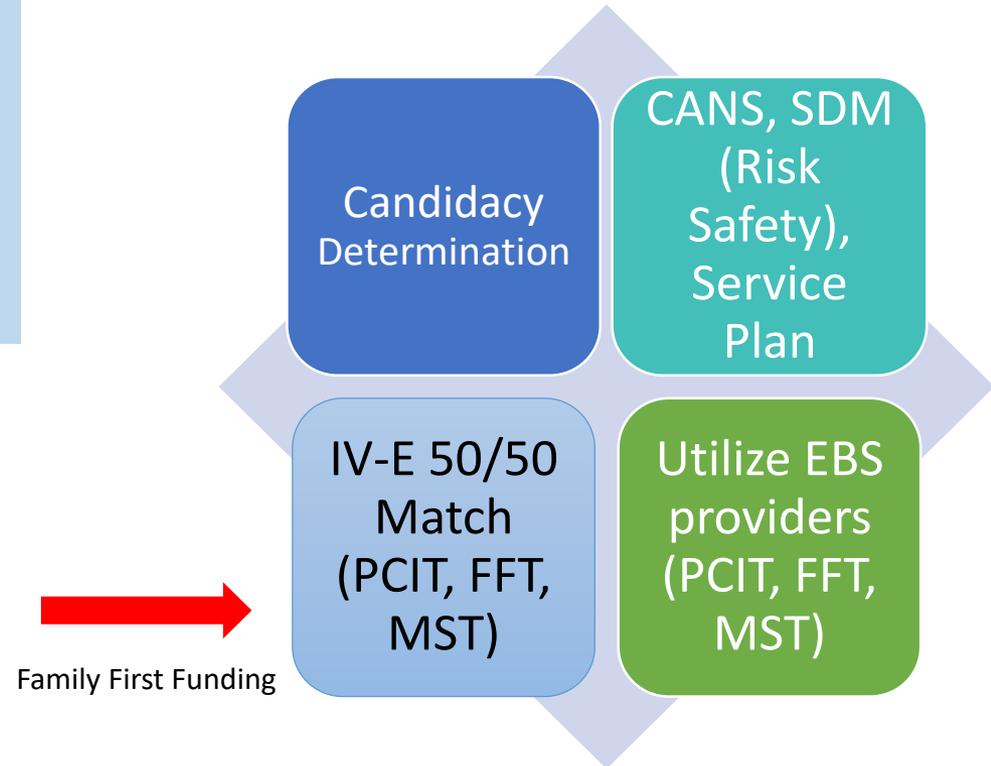
Functional Family  
Therapy  
(FFT)

Parent Child  
Interaction Therapy  
(PCIT)

# In-Home Practice and Family First Alignment

## Strategic Priorities

- In-home Practice Alignment/ Service Planning
- Evidence-Based Service Providers
- Ensure Fidelity
- Resource and Financial Accountability



# Collaboration with OCS

Service Provision

CSA/ FAPT

Evidenced Based Services

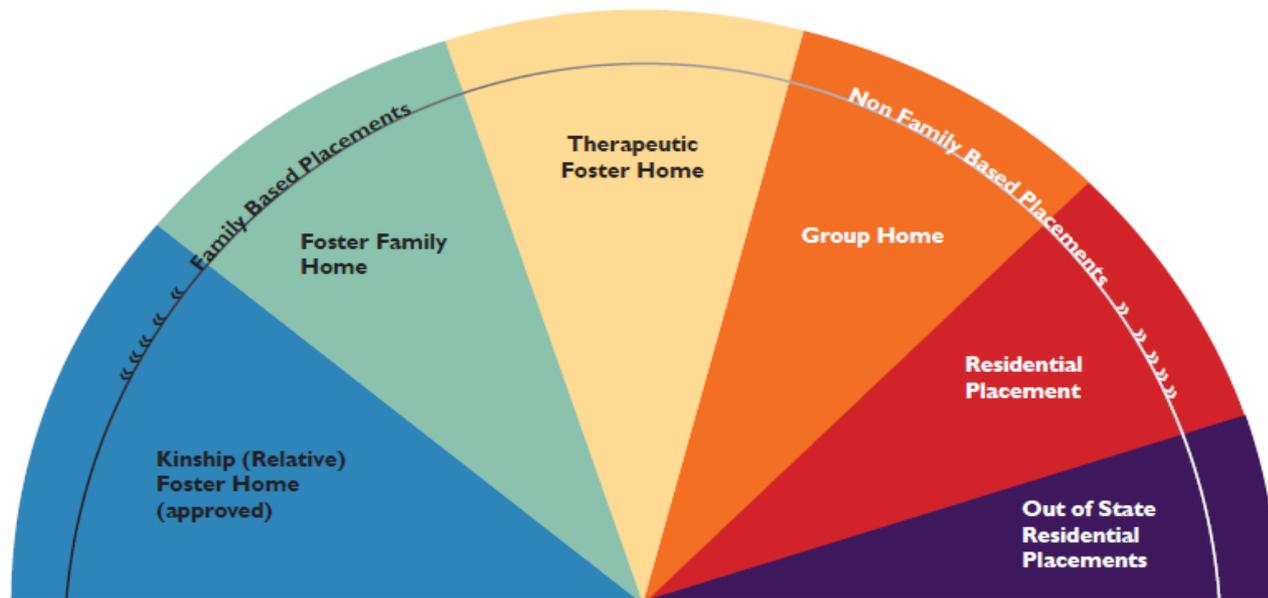
# Dis-Incentivize Congregate Care Placements



Foster Care Program  
Changes

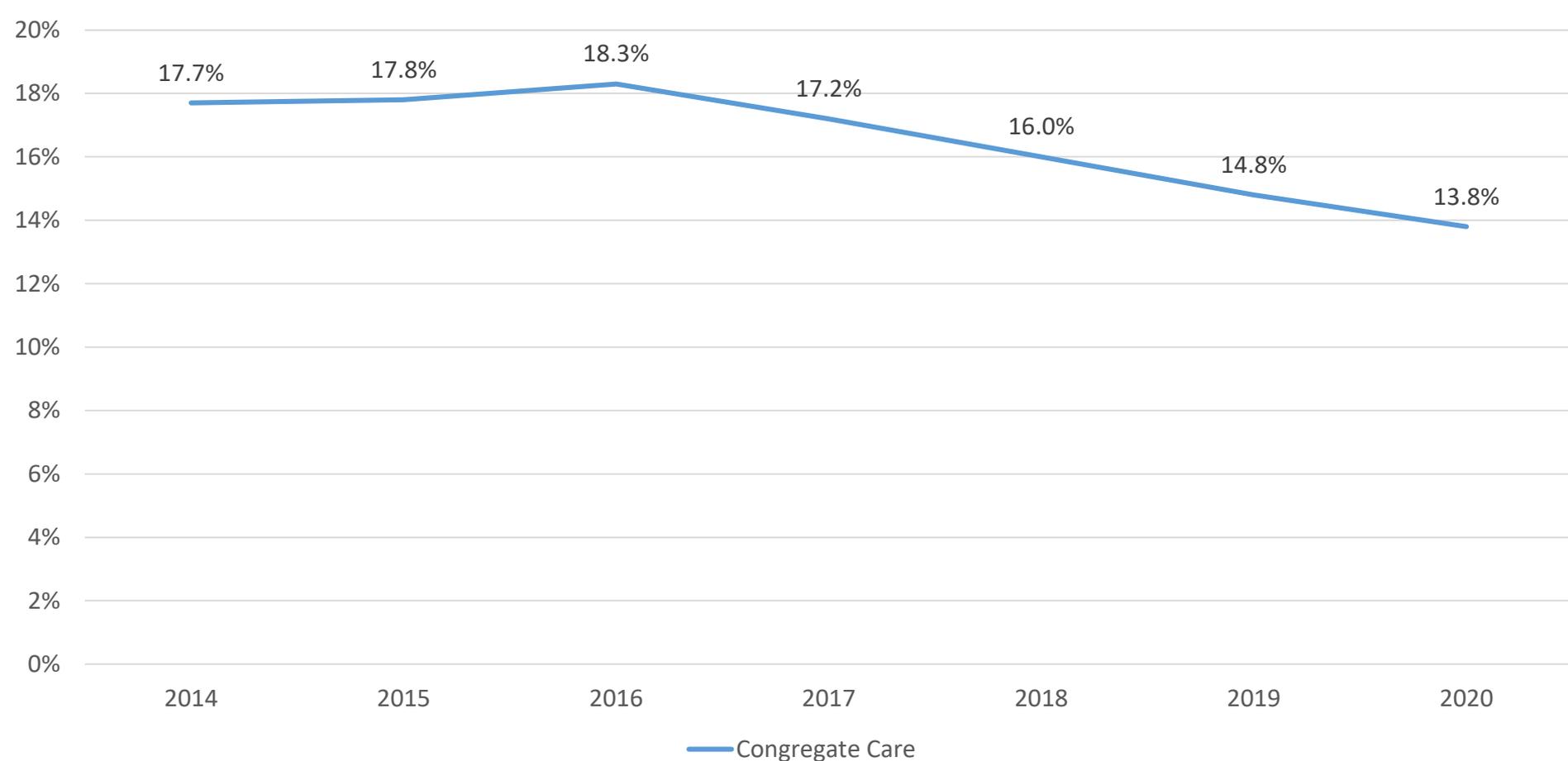
# Family First- Foster Care Program

- Increase relative placements
- Increase family-based placements
- Decrease congregate care
- Increase quality of congregate care (QRTP)

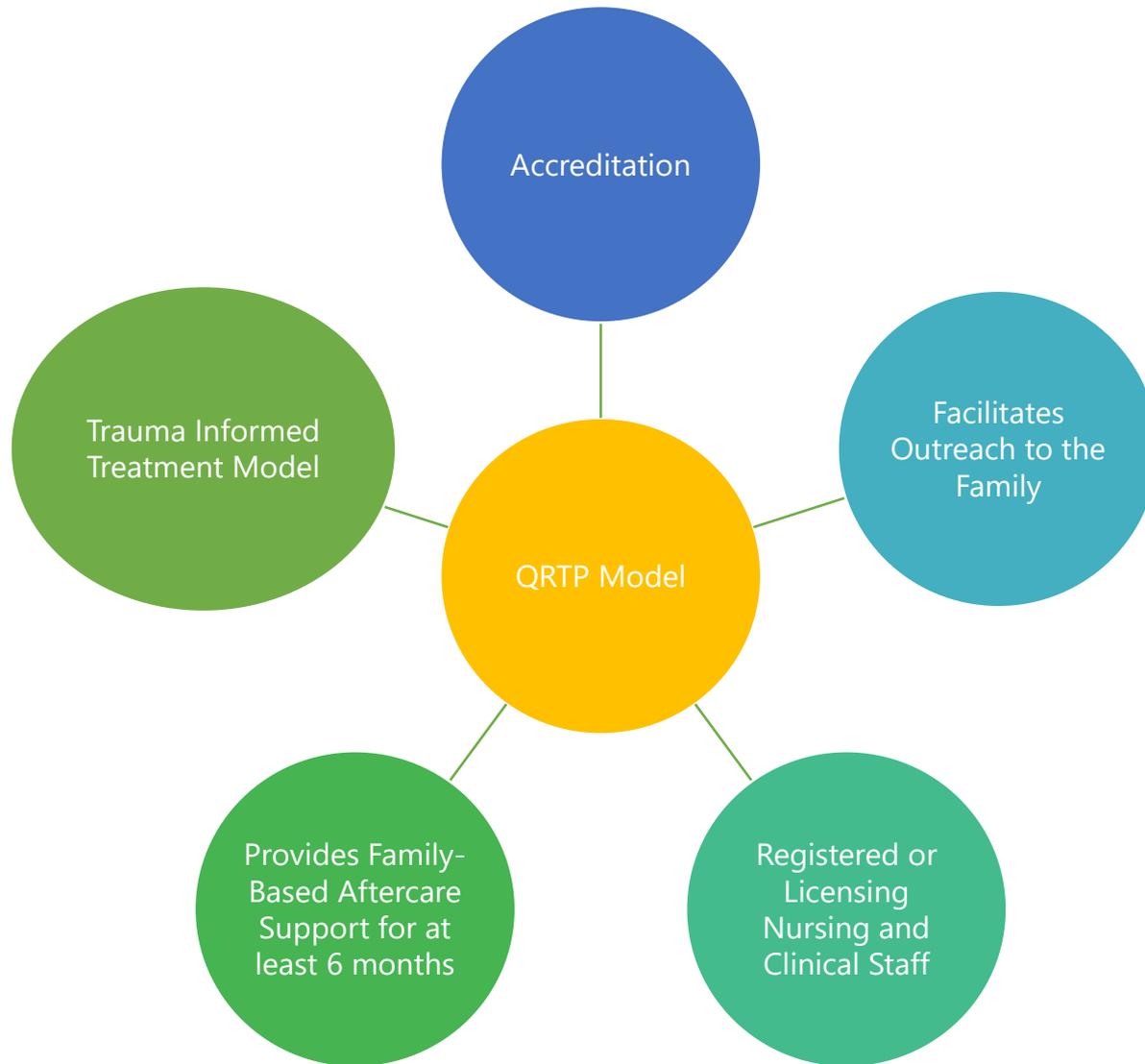


# Number of children in Congregate Care

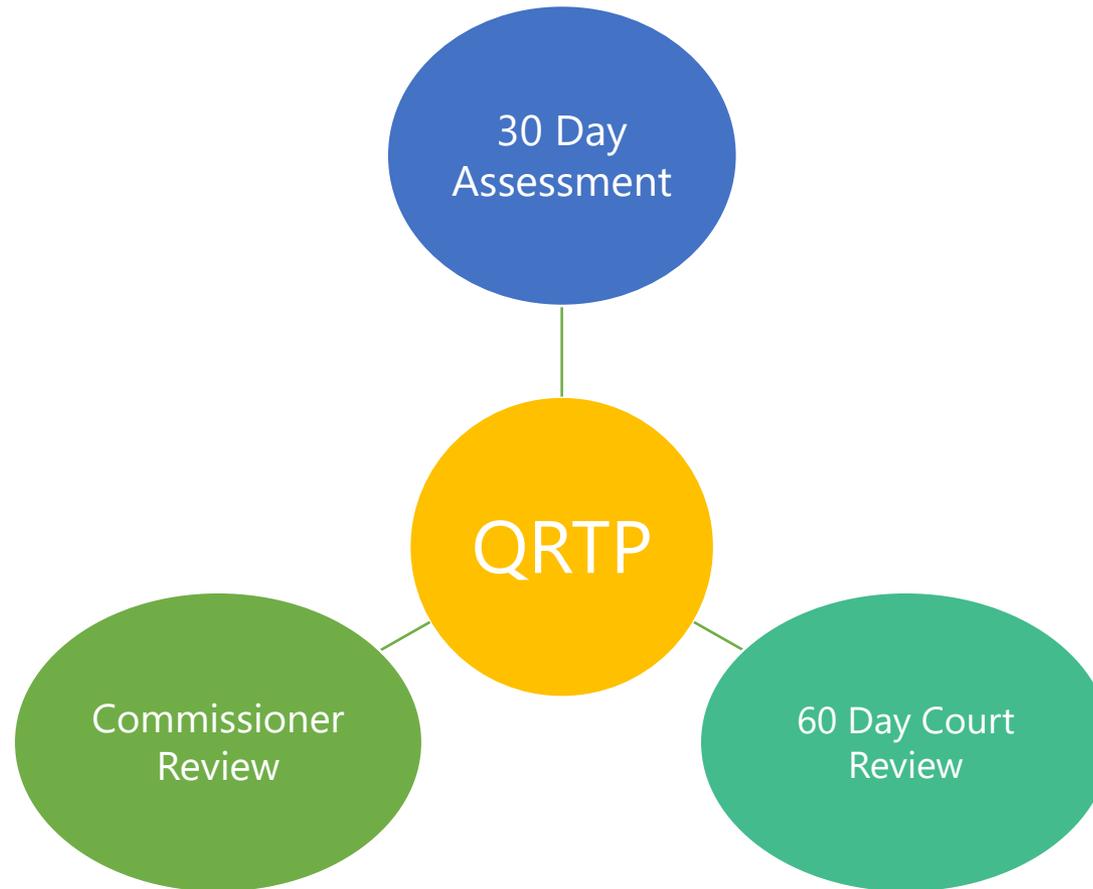
Percentage of Congregate Care as of June 30



# QRTP Provider Requirements



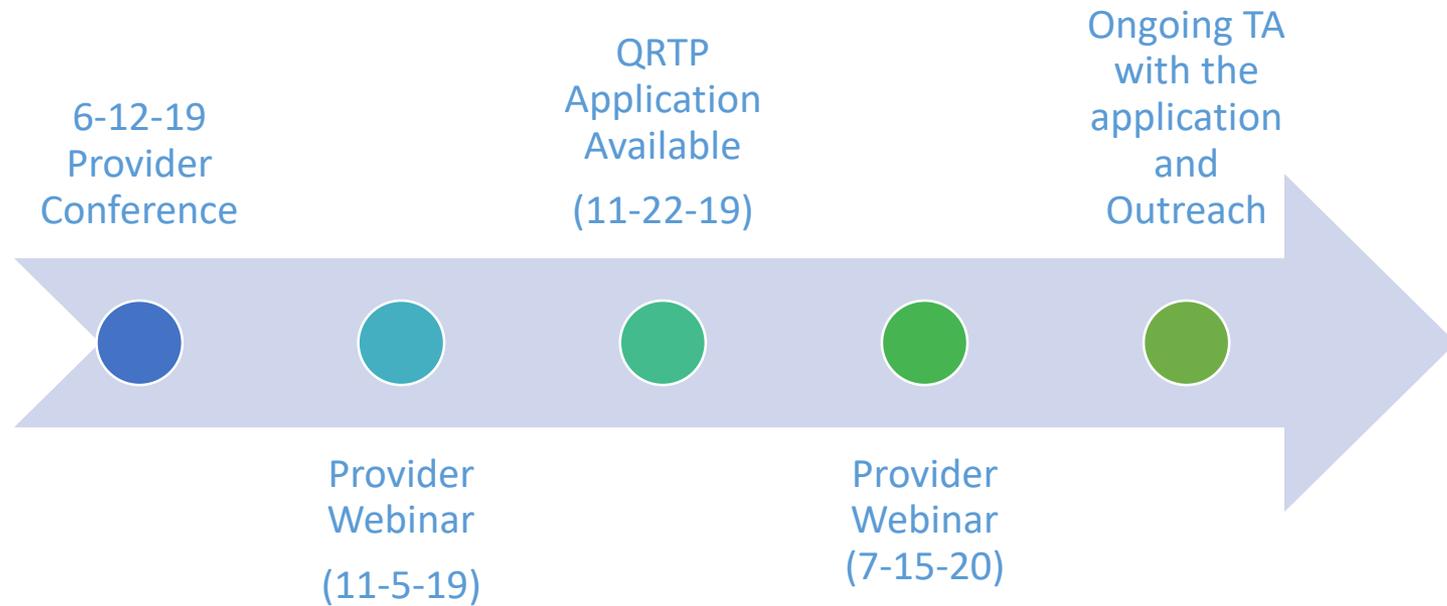
# QRTP Practice Requirements



# QRTP Implementation

- DFS QRTP Designation Process
- Court Approval Authority
- Review of Current Cases
- Outreach to Providers

# QRTP Outreach



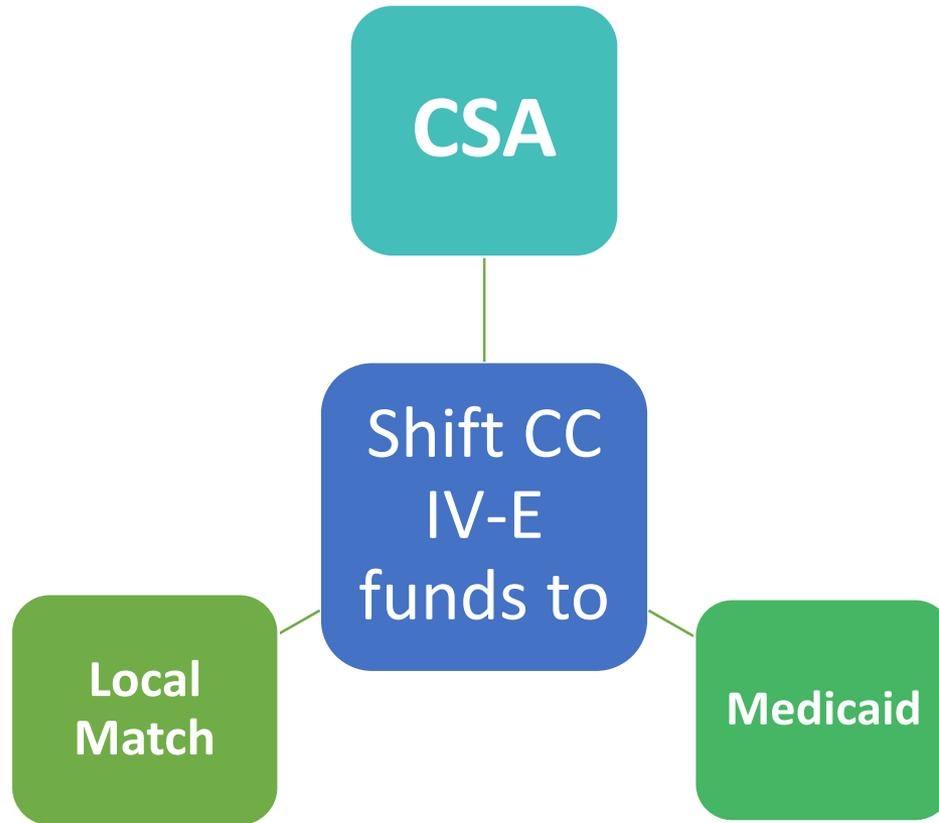
# QRTP Update

**3** Designated QRTP's

**9** Applications Received – Pending designation

**17** Applications expected in 30 days

# Impact of QRTP Implementation



# Psychiatric Treatment Facilities (PRTF)

Formerly Level C

Effective July 1, 2021

Psychiatric Treatment  
Facilities (PRTF)

Medicaid is sole  
payer of non  
educational costs

Title IV-E no longer  
payer of room/board  
and daily supervision

This will increase  
local Medicaid match

# Therapeutic Group Homes (TGH) and DSS Licensed Group Homes (CRF)

Formerly Level B and Level A. If facilities are not designated as QRTP

